

State of Washington Application for a Water Right Permit





Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE MINIMUM FEE OF \$50,00 PAYABLE TO

Section 1. APPLICANT			
Applicant/Business Name: Washing WSSB	gton State School for the Blind -	Phone No: 260-696-6321 13	Other No: 360-696-6321 131
Address: 2214 E. 13 th Street			
City: Vancouver		State: WA	Zip:98661
Email Address (optional): dean.sten	nehjem@wssb.wa.gov or rob.tracey	@wssb.wa.gov	
Contact Name (if different from abo	ove): same	Phone No:	Other No:
Relationship to Applicant: Dean Ste	enehjem, supt. of WSSB Rob Tra	cey, Facility Manag	ger - WSSB
Address:			
City:		State:	Zip:
Email Address (optional):			
ye were informed that we did not 973 with correspondence back a lights to allow us to continue to in nuch more cost effective than using the property of the p	s been used only for irrigation. Rest have documented water rights. Ye have documented water for irrigate the campus with the automorgen have do need to continue seep cost as low as possible in order.	We have been able ficate. We are recated system that have access to	e to locate paper work from questing temporary water has allowed the school to be being completed on the well water in order meet our water
	plete your project: Sept. 2008 or which water will be applied to a be		
Purpose(s) of Use	Rate (check one box only) Cubic Feet per Second (CFS) Gallons per Minute (GPM)	Year (AF/YR) (If known)	(Continuously or Seasonal)
Purpose(s) of Use Irrigation of approx. 6 acres	Cubic Feet per Second (CFS)		(Continuously or Seasonal) seasonal

TOTAL:	100	10.5	

Short Term/Temporary	Water	· Use
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Is this a request for a short term project (less than four months and non-recurring)?	☐ YES 🖾 NO
Is this request for a temporary permit? ☐ YES ☐ NO	
If yes to either question above, indicate the dates that the water will be needed:	
FROM: 09/12/08 TO: 10/30/2010 or until final permit for water is approved.	

For Ecology Use	APPLICATION NO:		SEPA: Exempt/Not Exempt	
	Fee Paid:	Check No:	ECY Coding: 001-001-WR1-0285-000011	
Date Returned		_By Priority Date	ByWRIA:	

Complete A or B, and C below A.) If Surface Water Source **B.) If Ground Water Source** ☐ Spring ☐ Creek ☐ River ☐ Lake Well(s) □ Other:_ Other: Well diameter & depth: 192 Source Name: Number of proposed points of withdrawal:1 Tributary to: Do you have an existing well? XYES NO Number of proposed diversion points: If available, attach Water Well Report and pump test. Do you have an existing diversion? \(\subseteq \text{YES} \subseteq \text{NO} \) Well Tag ID No. C.) Point of Diversion/Withdrawal - Legal Description Parcel No. Section Township 1/4 Range County NE 1E.W.M. Clark Lot(s) Block(s) Subdivision Irvington If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: 1405 Feet (\square North/ \boxtimes South) and 1520 feet (\square East/ \boxtimes West) from the (NW SW NE SE ____) corner of Section<u>54</u>. Parcel No. 1/4 Section Township County Range Block(s) Subdivision Lot(s) If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: feet (North/ South) and ____feet (East/ West) from the (NW SW NE SE) corner of Section NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper. Do you own the land on which the proposed point of diversion/withdrawal is located? XES NO If no, do you have legal authority to make this application for use of another's land? YES NO Provide the owner name(s), address, and phone number: Section 4. PLACE OF USE Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below. #45 #54 #57 #90 #101 JOHN MANEY DLC & NORTH IRVINGTON Section County Range Parcel No. NE 1E Clark Do you own all the lands on which the proposed place of use is located? XES NO. If no, do you have legal authority to make this application for use of another's land? YES NO Provide owner name(s), address, and phone number: Are there any other water rights or claims associated with this property or water system? YES NO If yes, provide the water right and/or claim numbers:_

Section 3. POINT OF DIVERSION OR WITHDRAWAL

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): One well located on the campus of the Washington State School for the Blind (WSSB). Well water is used to irrigate approximately 6 acres of the campus on a seasonal basis from approximately May - October of each year. Due to the soil conditions - granular sandy soil, irrigation is necessary to protect plantings and keep lawn areas from drying out and dying. The well which was originally installed in 1934, consist of a six inch pipe which is 170 feet in length. Depth of pump placed at 190 feet. Electric motor (10 H.P. 3 phase 208 volt vertical) - Maximum gallons per minute possible with the current pump = approximately 100 Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION Complete A or B, and C below A.) Domestic Water Systems only **B.) Municipal Water Systems only** (defined under RCW 90.03.015) Present population to be served water: Projected number of connections to be served: Estimate future population to be served: Type of connections: (e.g., home, recreational cabin) __ (20 year projection) C.) Water System Planning Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? YES NO If yes, date plan was approved ____/___ Water System Number:_ Name of water system: Are you within the service area of an existing water system? YES NO If yes, explain why you are unable to connect to the system:_ Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = 6 ACRES NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock:_____

Is the proposed project for a dairy farm? \square YES \boxtimes NO

Other Proposed Farm Uses

Describe all proposed uses:
Family Farm Water Act (RCW 90.66):
 Calculate the acreage in which you have a controlling interest, including only: Acreage irrigated under water rights acquired after December 8, 1977, Acreage proposed to be irrigated under this application, and Acreage proposed to be irrigated under other pending application(s).
Is the combined acreage under existing rights greater than 6000 acres? YES NO
Do you have a controlling interest in a Family Farm Development Permit? YES NO
If yes, enter Permit No:
Section 8. OTHER WATER USES
Hydropower
Indicate total feet of head and proposed capacity in kilowatts:
Describe works:
Indicate all uses to which power is to be applied:
FERC License No:
Mining/Industrial Use
Describe use, method of supplying and utilizing water:
그 얼마나 되는 생기를 다 하면 하는 것이 되었다면 그는 사람들이 얼마를 하는 것이 되었다면 하는 것이 없다.
<u> </u>
Other Use
Irrigation of 6 acres - "School for the Blind property"
Section 9. WATER STORAGE
Section 9. WATER STORAGE
Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO
Are you proposing to store more than 10 acre-feet of water? YES NO
Will the water depth be 10 feet or more? ☐ YES ☒ NO
If you answered yes to any of the above questions, please describe:
NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.
Section 10. DRIVING DIRECTIONS
Provide detailed driving directions to the project site: South on I 5 to Mill Plain exit east. East on Mill Plain to
Reserve Street then turn north three blocks to 13 th street. Turn east on 13 th street four blocks to WSSB
Administration building

ite Address:22	214 E 13 th Street	Vancouver, WA	98661		

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Rib Tracey	Clober Francy	8-22-58
Print Name	Signature	Date
(Applicant or authorized representative		
Dean o Stenehjem Print Name	Signature Human	8-22-08 Date
(Landowner of Place of Use) State		
Print Name	Signature	Date
(Landowner of Place of Use)		
Print Name	Signature	Date
(Landowner of Place of Use)		

Submit your application to: DEPARTMENT OF ECOLOGY

CASHIERING SECTION

PO BOX 5128

LACEY WA 98509-5128

Please check the region in which your proposed project is located.

Southwest Northwest Central Eastern

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



Southwest Regional Office: 360-407-6300